

Application Data Sheet

Application Information

Application number::	09/724,288
Filing Date::	11/28/00
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	PREVENTION AND TREATMENT OF AMYLOIDOGENIC DISEASE
Attorney Docket Number::	15270J-004765US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	18
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	Yes
Petition Type::	Petition for Extension of Time Under CFR 1.136(a)
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dale
Middle Name::	B.
Family Name::	Schenk
Name Suffix::	
City of Residence::	Burlingame
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	1542 Los Altos Drive
City of Mailing Address::	Burlingame
State or Province of mailing address::	CA
Country of mailing address::	
Postal or Zip Code of mailing address::	94010

Applicant Authority Type::	Inventor
Primary Citizenship Country::	France
Status::	Full Capacity
Given Name::	Frederique
Middle Name::	
Family Name::	Bard
Name Suffix::	
City of Residence::	Pacifica
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	1111 Park Pacifica Avenue
City of Mailing Address::	Pacifica
State or Province of mailing address::	CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94044

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Theodore

Middle Name::

Family Name::

Yednock

Name Suffix::

City of Residence::

Forest Knolls

State or Province of Residence::

CA

Country of Residence::

US

Street of Mailing Address::

184 Arroyo Road

City of Mailing Address::

Forest Knolls

State or Province of mailing address::

CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94933

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	37,273	Nina M. Ashton
Primary	32,731	Jean M. Duvall
Primary	31,547	Lisabeth F. Murphy

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/580,018	05/26/00
09/580,018	Continuation-in-part of	09/322,289	05/28/99

Assignee Information

Assignee Name::	Neuralab Limited
Street of mailing address::	102 St. James Court
City of mailing address::	Flatts, Smiths
State or Province of mailing address::	
Country of mailing address::	Bermuda
Postal or Zip Code of mailing address::	FL 04